

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 9 OF 103  
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Community Pharmacists Association - PAC

Full Name (Last, First, Middle Initial)

**A. Bradley J. Arthur**

Mailing Address 431 Tonawanda St

City	State	Zip Code
Buffalo	NY	14207-2625

FEC ID number of contributing federal political committee.

C

Name of Employer

Black Rock Pharmacy

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : 2015070885316-12

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kevin Atkins**

Mailing Address 701 3rd St

City	State	Zip Code
Marble Falls	TX	78654-5720

FEC ID number of contributing federal political committee.

C

Name of Employer

Atkins Pharmacy Services

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : 2015070885316-13

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Gareen Avakian**

Mailing Address 4248 MacArthur Blvd

City	State	Zip Code
Oakland	CA	94619-1908

FEC ID number of contributing federal political committee.

C

Name of Employer

High Street Pharmacy

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : 2015070885316-14

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►